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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MINNESOTA	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	Part 1: Identify Yourself						
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name						
	Write the name that is on your government-issued picture identification (for example, your driver's	Brian First name Dale		Rachelle First name Valene			
	license or passport).	Middle name		Middle name			
	Bring your picture identification to your meeting with the trustee.	Groshong Last name and Suffix (Sr., Jr., II, III)		Groshong Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years						
	Include your married or maiden names.						
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6380		xxx-xx-6575			

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Debtor 1 Brian Dale Groshong
Debtor 2 Rachelle Valene Groshong

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)
	EINs	EINs
Where you live	9642 110th St	If Debtor 2 lives at a different address:
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
	Morrison	
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. □ I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) Business name(s) Business name(s) Business name(s) Business name(s) Business name or EINs. Business name or Elson

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	otor 1 Brian Dale Gros otor 2 Rachelle Valence				Case n	number (if known)	
Pari	t 2: Tell the Court Abou	ut Your Bankruptc	y Case				
7.	The chapter of the Bankruptcy Code you a			of each, see <i>Notice Re</i>		C. § 342(b) for Individu	als Filing for Bankruptcy
	choosing to file under	☐ Chapter 7	iloo, go to trio top or	page i and entest the	appropriate sex.		
		☐ Chapter 11					
		☐ Chapter 12					
		■ Chapter 13					
8.	How you will pay the fee	about ho order. If y a pre-prii	w you may pay. Typi our attorney is subn nted address.	ically, if you are paying nitting your payment or	the fee yourself, your behalf, your	you may pay with cash, r attorney may pay with	local court for more details , cashier's check, or money a credit card or check with
				s (Official Form 103A).	e this option, sign	and attach the Applica	tion for Individuals to Pay
		but is not applies to	required to, waive yo your family size and	our fee, and may do so d you are unable to pa	o only if your incor y the fee in install	me is less than 150% o ments). If you choose the	ter 7. By law, a judge may, f the official poverty line that nis option, you must fill out
		the <i>Appli</i>	cation to Have the C	Chapter 7 Filing Fee Wa	nived (Official Forr	m 103B) and file it with	your petition.
9. Have you filed for □ No.							
	bankruptcy within the last 8 years?	■ Yes.					
	•	Dist	rict Duluth	When	2/20/19	Case number	19-50134
		Dist	rict	When		Case number	
		Dist	rict	When		Case number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?						
		Deb	tor			Relationship to yo	ou
		Dist	rict	When		Case number, if I	known
		Deb	tor			Relationship to yo	
		Dist	rict	When		Case number, if I	known
11.	Do you rent your residence?	■ No. Go	to line 12.				
		☐ Yes. Ha	s your landlord obta	ined an eviction judgm	ent against you?		
			No. Go to line 1	12.			
			Yes. Fill out <i>Init</i> this bankruptcy		n Eviction Judgme	ent Against You (Form 1	101A) and file it as part of

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Deb	tor 2 Rachelle Valene G	Proshong			Case number (if known)
Par	Report About Any Bu	ısinesses	You Own	as a Sole Proprie	etor
	Are you a sole proprietor				
12.	of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	usiness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	ate & ZIP Code
	it to this petition.		Check	the appropriate bo	ox to describe your business:
				Health Care Busin	iness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	al Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	ve
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline: operation	s. If you in	dicate that you are ow statement, and f	e court must know whether you are a small business debtor so that it can set appropriate e a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am n	ot filing under Char	apter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.		r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fi	ling under Chapter	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	4: Report if You Own or	Have Any	Hazardo	us Property or An	ny Property That Needs Immediate Attention
	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat	□ Yes.			
	of imminent and identifiable hazard to	⊔ Yes.	What is t	he hazard?	
	public health or safety? Or do you own any				
	property that needs immediate attention?			iate attention is why is it needed?	
	For example, do you own perishable goods, or				
	livestock that must be fed, or a building that needs		Where is	the property?	
	urgent repairs?				Number, Street, City, State & Zip Code

Debtor 1 Brian Dale Groshong

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Debtor 1 Brian Dale Groshong
Debtor 2 Rachelle Valene Groshong

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing	about credit
counseling because of:	

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 19-50397 Doc 1 Filed 05/14/19 Entered 05/14/19 15:51:46 Desc Main Document Page 6 of 74

	tor 2 Rachelle Valene G				Case nu	umber (if known)		
Par	6: Answer These Quest	ions for Re	porting Purposes					
16.	What kind of debts do you have?		Are your debts primarily consindividual primarily for a person			e defined in 11 U.S.C. §	101(8) as "incurred by an	
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
			Are your debts primarily businency for a business or investr					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe	e that are not consun	ner debts or bus	siness debts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7.	Go to line 18.				
Do you estimate that after any exempt property is excluded and are paid that funds will be available to distribute to unsecured creditors?				nd administrative expenses				
	administrative expenses		□ No					
	are paid that funds will be available for distribution to unsecured creditors?		Yes					
18	How many Creditors do	-		☐ 1,000-5,000		☐ 25,001-50	2.000	
	you estimate that you	■ 1-49 □ 50-99		☐ 1,000-5,000 ☐ 5001-10,000		☐ 25,001-50 ☐ 50,001-10		
	owe?	☐ 100-19 ☐ 200-99		10,001-25,00	00	☐ More than	1100,000	
19.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 -	- \$10 million	□ \$500,000	,001 - \$1 billion	
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001			00,001 - \$10 billion	
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 □ \$100,000,00			000,001 - \$50 billion n \$50 billion	
20.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 -	- \$10 million	□ \$500,000	,001 - \$1 billion	
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001			00,001 - \$10 billion	
			001 - \$500,000 001 - \$1 million	\$50,000,001 \$100,000,00			000,001 - \$50 billion n \$50 billion	
Par	7: Sign Below							
For	you	I have exa	amined this petition, and I declar	re under penalty of p	erjury that the i	information provided is	true and correct.	
		If I have c United Sta	hosen to file under Chapter 7, I attes Code. I understand the relie	am aware that I may ef available under ea	/ proceed, if eligach chapter, and	gible, under Chapter 7, d I choose to proceed u	11,12, or 13 of title 11, nder Chapter 7.	
			ney represents me and I did not t, I have obtained and read the n				lp me fill out this	
		I request	relief in accordance with the cha	apter of title 11, Unite	ed States Code,	, specified in this petitio	n.	
			and making a false statement, co by case can result in fines up to \$					
		/s/ Brian	Dale Groshong			Valene Groshong		
			ale Groshong of Debtor 1		Rachelle Va Signature of D	llene Groshong Debtor 2		
		Executed	on May 14, 2019		Executed on	May 14, 2019		
			MM / DD / YYYY			MM / DD / YYYY		

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Debtor 1 Debtor 2	Brian Dale Grosh Rachelle Valene	<u> </u>	Cas	Case number (if known)		
•	attorney, if you are ted by one	under Chapter 7, 11, 12, or 13 of title 11, Un	ited States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)		
•	e not represented by ey, you do not need s page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.		vledge after an inquiry that the information in the		
		/s/ Jake Peden	Date	May 14, 2019		
		Signature of Attorney for Debtor		MM / DD / YYYY		
		Jake Peden				
		Printed name				
		Kain & Scott, PA				
		Firm name				
		13 7th Avenue South				
		St. Cloud, MN 56301				
		Number, Street, City, State & ZIP Code				
		Contact phone 320-252-0330	Email address	squaintance@kainscott.com		
		0400315 MN				
		Bar number & State				

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Fill in this informa	ation to identify your	case:		
Debtor 1	Brian Dale Grosh	ong		
	First Name	Middle Name	Last Name	
Debtor 2	Rachelle Valene	Groshong		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Banl	kruptcy Court for the:	DISTRICT OF MINNESOTA	1	
Case number				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

you	original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	90,100.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	166,323.52
	1c. Copy line 63, Total of all property on Schedule A/B	\$	256,423.52
Par	2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	148,622.43
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	8,898.88
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	80,693.22
	Your total liabilities	\$	238,214.53
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,070.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,795.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	chedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a nersona	l family or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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	Brian Dale Groshong	-
Debtor 2	Rachelle Valene Groshong	Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

7,987.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	8,898.88
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	8,898.88

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			Doc	ument	Page 10 of 74			
Fill in this	information to identify	your case and th	is filing	j:				
Debtor 1	Brian Dale G	roshong						
Dobtor 0	First Name		Name		Last Name			
Debtor 2 (Spouse, if filing		lene Groshong Middle	Name		Last Name			
United Stat	es Bankruptcy Court for	the: DISTRICT	OF MIN	NESOTA				
Case numb	per				_			Check if this is an amended filing
Sched	Form 106A/E	operty			an asset fits in more than on			12/15
Part 1: Des 1. Do you ov	If more space is needed, y question. scribe Each Residence, Bewood or have any legal or equal to the second secon	attach a separate sh uilding, Land, or Otl	neet to tl	his form. On th	le are filing together, both are ne top of any additional page: wn or Have an Interest In I, land, or similar property?			
1.1			What	is the propert	y? Check all that apply			
	110th St			Single-family		Do not deduct sec	ured claim	ns or exemptions. Put
Street ad	ddress, if available, or other des	cription	_ 	Duplex or mu	ulti-unit building n or cooperative	the amount of any	secured of	claims on Schedule D: Secured by Property.
Little City	Falls MN	56345-0000 ZIP Code		Manufactured Land Investment p	d or mobile home	Current value of entire property?		Current value of the portion you own? \$90,100.00
J,				Timeshare Other		Describe the natu	ure of you	ir ownership interest cy by the entireties, or
			_		t in the property? Check one	a life estate), if ki Joint Tenant	nown.	
Morri	ison					Survivorship		
County	ISUII			At least one of	Debtor 2 only of the debtors and another you wish to add about this ite	(see instructions		unity property
			prope Deb ATT	erty identificat tor's Resid ACHED EX	ion number: ence: Homestead Real	Property Legali		ribed as:SEE
					from Part 1, including an			\$90,100.00
pages	you have attached for	Part 1. Write that	numbe	r here		=>	l	Ψ30, 100.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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ebto ebto		achelle Valene Groshong		Case number (if known)	
Ca	rs, vans,	trucks, tractors, sport utility ve	ehicles, motorcycles		
ı 🗆	No				
•	Yes				
.1	Make:	Mitsubishi	Who has an interest in the property? Check one	Do not deduct secured cl	laims or exemptions. Put ed claims on Schedule D:
	Model:	Endeavor	Debtor 1 only		ims Secured by Property.
	Year:	2005	Debtor 2 only	Current value of the	Current value of the
	Approxin	nate mileage: 160,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
		ormation:	☐ At least one of the debtors and another		
		s based on kbb.com party value.	☐ Check if this is community property (see instructions)	\$3,453.00	\$3,453.00
2	Make:	Dodge	Who has an interest in the property? Check one	Do not deduct secured cl	
	Model:	Ram	☐ Debtor 1 only		ed claims on Schedule D: ims Secured by Property.
	Year:	2015	Debtor 2 only		, , ,
	Approxin	nate mileage: 60,000	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other inf	formation:	☐ At least one of the debtors and another		
		s based on kbb.com	_	\$18,000.00	£40,000,00
		e party value. ndering)	☐ Check if this is community property (see instructions)	\$10,000.00	\$18,000.00
	(Surrei	idering)	(**************************************		
3	Make:	Harley Davidson	Who has an interest in the property? Check one	Do not deduct secured cl	
	Model: Ultra Classic		Debtor 1 only		ed claims on Schedule D: ims Secured by Property.
	Year:	2008	Debtor 2 only		
	Approxin	nate mileage:	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other inf	formation:	☐ At least one of the debtors and another		
	(surrer	ndering)	☐ Check if this is community property (see instructions)	\$8,000.00	\$8,000.00
Exa	ntercraft, amples: B	aircraft, motor homes, ATVs a		, and accessories	\$8,000
•	Yes				
.1	Make:	Lund 16ft boat	Who has an interest in the property? Check one	Do not deduct secured cl	
	Model:		☐ Debtor 1 only		ed claims on Schedule D: ims Secured by Property.
	Year:	1990	Debtor 2 only		, , ,
			■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other inf	formation:	☐ At least one of the debtors and another	chare property.	portion you own.
			Check if this is community property (see instructions)	\$2,500.00	\$2,500.00
2	Make:	Honda	Who has an interest in the property? Check one	Do not deduct secured cl	laims or exemptions. Put ed claims on Schedule D:
	Model:	Fourtrax Foreman	☐ Debtor 1 only		ims Secured by Property.
	Year:	2007	Debtor 2 only	Current value of the	Current value of the
			■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	formation:	☐ At least one of the debtors and another		
	1		Check if this is community property	\$2,500,00	\$2,500,00

Official Form 106A/B

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Debto Debto		Brian Dale Groshong Rachelle Valene Groshong	J Ca	se number (if known)	
4.3	Make:	Enlcosed Trailer	Who has an interest in the property? Check one		claims or exemptions. Put red claims on Schedule D:
	Model:	0045	Debtor 1 only	Creditors Who Have Cla	aims Secured by Property.
	Year:	2015	Debtor 2 only	Current value of the	Current value of the
	O11 .		■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:	At least one of the debtors and another Check if this is community property (see instructions)	\$1,500.00	\$1,500.00
4.4	Make:	Weirs	Who has an interest in the property? Check one		claims or exemptions. Put red claims on Schedule D:
	Model:	Pontoon	Debtor 1 only	Creditors Who Have Cla	aims Secured by Property.
	Year:	1988	Debtor 2 only	Current value of the	Current value of the
			Debtor 1 and Debtor 2 only	entire property?	portion you own?
		formation: Evinrude Motor and	At least one of the debtors and another Check if this is community property (see instructions)	\$5,000.00	\$5,000.00
Part 3	: Descr	ibe Your Personal and Househol	Id Items e interest in any of the following items?		\$40,953.00 Current value of the portion you own?
		goods and furnishings			Do not deduct secured claims or exemptions.
_	No Yes. De	escribe Household G	Goods, Furnishings, Major and Minor Applianc	es	\$2,000.00
Ex	No	Televisions and radios; audio, including cell phones, camera escribe	video, stereo, and digital equipment; computers, printe s, media players, games o, 2-DVD Player and DVD's, Computer, Ipad, 2		
			nera, Game System		\$1,000.00
<i>E</i> x	<i>amples:</i> No	s of value Antiques and figurines; paintin other collections, memorabilia	gs, prints, or other artwork; books, pictures, or other art , collectibles	objects; stamp, coin, or ba	aseball card collections;
		Books & Pic	tures		\$25.00
Ex -	amples: No	t for sports and hobbies Sports, photographic, exercise musical instruments escribe	e, and other hobby equipment; bicycles, pool tables, gol	f clubs, skis; canoes and k	ayaks; carpentry tools;
		Fishing Gear	, Air Rifle		\$500.00

Official Form 106A/B

Case 19-50397 Doc 1 Filed 05/14/19 Entered 05/14/19 15:51:46 Desc Main Page 13 of 74 Document Debtor 1 **Brian Dale Groshong** Debtor 2 Rachelle Valene Groshong Case number (if known) 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ No Yes. Describe..... 9 mm, 40 cal handguns, 12 ga shotgun, 410 rifle, 22 rifle, 30.06 \$2,600.00 rifle, 17 HMR, AR 15 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$200.00 Clothing \$200.00 Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... **Wedding Band** \$50.00 Costume Jewelry & Wedding Ring \$250.00 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ No Yes. Describe..... 3 dogs named Maggie, Nino Raven \$20.00 **Cat named Twister** 14. Any other personal and household items you did not already list, including any health aids you did not list □ No ■ Yes. Give specific information..... Riding Lawnmower, Snowblower, Shovels, Rakes, Misc. Hand & \$1,000.00 Power Tools, Patio Furniture, Grill, 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$7,845.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes.....

Schedule A/B: Property

Official Form 106A/B

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Debto Debto		Brian Dale G Rachelle Va				Case number (if known)	
						Cash	\$10.00
E	Exampl				certificates of deposit; shares in cro he same institution, list each.	edit unions, brokerage	houses, and other similar
_	No Yes				Institution name:		
			17.1.	Checking Account	Mid MN Federal Credit Unio	n	\$110.00
			17.2.	Checking Account	Pine River State Bank		\$350.00
				cly traded stocks ent accounts with brokera	ge firms, money market accounts		
	Yes			Institution or issuer name			
j	oint ve	•	ock and	interests in incorporate	l and unincorporated businesses	s, including an interes	st in an LLC, partnership, and
	No Yes. (Give specific inf		about them		% of ownership:	
1	Vegotia	ble instruments	include	personal checks, cashiers	e and non-negotiable instruments checks, promissory notes, and mo to someone by signing or delivering	ney orders.	
	No Yes. G	Give specific info		about them uer name:			
_E		ent or pension les: Interests in			thrift savings accounts, or other pe	ension or profit-sharing	plans
-	Yes. L	ist each accour		tely. of account:	Institution name:		
			Pens	sion	Preferred Pump & Equipme	nt LP	\$114,716.18
Y E	∕our sh E <i>xampl</i> No		d deposi	ts you have made so that	ou may continue service or use fro utilities (electric, gas, water), telec Institution name or individual:		nies, or others
			or a perio	dic payment of money to	ou, either for life or for a number of	vears)	
	No Yes	•	·	ne and description.		,,	
		s in an educations. §§ 530(b)(1),			ed ABLE program, or under a qua	alified state tuition pro	ogram.
	No Yes	In	stitution	name and description. Sep	arately file the records of any intere	ests.11 U.S.C. § 521(c)	:
	No	•			han anything listed in line 1), and	l rights or powers exe	ercisable for your benefit
	Yes. (Give specific inf	ormation	about them			

Schedule A/B: Property

Official Form 106A/B

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Case 19-50397 Doc 1 Filed 05/14/19 Entered 05/14/19 15:51:46 Desc Main Page 15 of 74 Document Debtor 1 **Brian Dale Groshong** Debtor 2 Rachelle Valene Groshong Case number (if known) 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses Yes. Give specific information about them... CDL \$0.00 Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... \$0.00 Anticipated 2019 Tax Refunds 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

□ No

Yes. Give specific information..

\$839.34 Temporary Total Disability payments \$1.500.00 Earned Unpaid Wages

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

□ No

Yes. Name the insurance company of each policy and list its value.

Company name: Beneficiary:

Surrender or refund

value:

Term Life Insurance Through Employer

(No Cash Value)

Spouse

\$0.00

Term Life Insurance (no cash value)

Spouse

\$0.00

page 6

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

□ No

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Debtor 1 Debtor 2	Brian Dale Groshong Rachelle Valene Gros			Case number (if known)	
■ Voc	Give specific information	<u> </u>		<u> </u>	
— 165.	Give specific information				
			elle's father recently ting any inheritance	passed away, but Debtors are not	Unknowr
	s against third parties, wholes: Accidents, employmer			it or made a demand for payment s to sue	
	Describe each claim				
34. Other	contingent and unliquidat	ted claims o	f every nature, includin	g counterclaims of the debtor and rights t	o set off claims
■ No			•	•	
☐ Yes.	Describe each claim				
35. Any fir No	nancial assets you did not	t already list			
	Give specific information				
00 411			5		
				ny entries for pages you have attached	\$117,525.52
Part 5: De	section Any Rusingss-Polated	I Proporty Voi	Own or Have an Interest	In. List any real estate in Part 1.	
	<u> </u>				
	own or have any legal or equ i o to Part 6.	itable interest	in any business-related p	roperty?	
☐ Yes. 0	Go to line 38.				
	escribe Any Farm- and Commo			n or Have an Interest In.	
46. Do you	ı own or have any legal o	r equitable i	nterest in any farm- or	commercial fishing-related property?	
	Go to Part 7.				
∐ Yes	s. Go to line 47.				
Part 7:	Describe All Property You	Own or Have	an Interest in That You Die	d Not List Above	
Exam _l	u have other property of a ples: Season tickets, countr				
■ No □ Yes.	Give specific information				
54. Add 1	the dollar value of all of vo	our entries f	rom Part 7. Write that n	umber here	\$0.00

Official Form 106A/B Schedule A/B: Property page 7

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Debtor 1 **Brian Dale Groshong** Debtor 2 Rachelle Valene Groshong Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$90,100.00 Part 2: Total vehicles, line 5 56. \$40,953.00 Part 3: Total personal and household items, line 15 57. \$7,845.00 58. Part 4: Total financial assets, line 36 \$117,525.52 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$166,323.52 Copy personal property total \$166,323.52 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$256,423.52

Official Form 106A/B Schedule A/B: Property page 8

Jigon Soll

To the following described Real Estate situated in MORRISON COUNTY

No. 1.

The South Half of Southwest Quarter of Southeast Quarter (S^1_{2} of SW^1_{4} of SE^1_{4}), Section Four (4), Township One Hundred Twenty-eight (128), North of Range Thirty (30), West of the Fifth Principal Meridian.

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Fill in this info	rmation to identify your	case:		
Debtor 1	Brian Dale Grosh	ong		
	First Name	Middle Name	Last Name	
Debtor 2	Rachelle Valene	Groshong		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF MINNESO	ТА	
Case number				
(if known)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt
1. Whic	h set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property Current value of the portion you own Copy the value from Schedule A/B that lists this property 9642 110th St Little Falls, MN 56345 Morrison County Debtor's Residence: Homestead Real Property Legally Described as:SEE ATTACHED EXHIBIT A Value is based on property tax estimated market value. Line from Schedule A/B: 1.1 2005 Mitsubishi Endeavor 160,000 miles Value is based on kbb.com private party value. Line from Schedule A/B: 3.1 2015 Dodge Ram 60,000 miles Value is based on kbb.com private party value. Line from Schedule A/B: 3.2 2016 Marley Davidson Ultra Classic (surrendering) Line from Schedule A/B: 3.3 2017 Morrison County Check only one box for each exemption. Check only one box for each exempt					
9642 110th St Little Falls, MN 56345 Morrison County Debtor's Residence: Homestead Real Property Legally Described as:SEE ATTACHED EXHIBIT A Value is based on property tax estimated market value. Line from Schedule A/B: 1.1 2005 Mitsubishi Endeavor 160,000 miles Value is based on kbb.com private party value. Line from Schedule A/B: 3.1 2015 Dodge Ram 60,000 miles Value is based on kbb.com private party value. (surrendering) Line from Schedule A/B: 3.2 2008 Harley Davidson Ultra Classic (surrendering) Line from Schedule A/B: 3.2 \$90,100.00 \$0.00 \$0.00 \$11 U.S.C. § 522(d)(2) 100% of fair market value, up to any applicable statutory limit 11 U.S.C. § 522(d)(2) 12 100% of fair market value, up to any applicable statutory limit 13 U.S.C. § 522(d)(2) 14 U.S.C. § 522(d)(2) 15 2008 Harley Davidson Ultra Classic (surrendering) Line from Schedule A/B: 3.2			· · · · · · · · · · · · · · · · · · ·		Specific laws that allow exemption
Morrison County Debtor's Residence: Homestead Real Property Legally Described as:SEE ATTACHED EXHIBIT A Value is based on property tax estimated market value. Line from Schedule A/B: 1.1 2005 Mitsubishi Endeavor 160,000 miles Value is based on kbb.com private party value. Line from Schedule A/B: 3.1 2015 Dodge Ram 60,000 miles Value is based on kbb.com private party value. (surrendering) Line from Schedule A/B: 3.2 2008 Harley Davidson Ultra Classic (surrendering) 100% of fair market value, up to any applicable statutory limit 11 U.S.C. § 522(d)(2) 100% of fair market value, up to any applicable statutory limit 11 U.S.C. § 522(d)(2) 12 U.S.C. § 522(d)(2) 13 U.S.C. § 522(d)(2)			Che	eck only one box for each exemption.	
Property Legally Described as:SEE ATTACHED EXHIBIT A Value is based on property tax estimated market value. Line from Schedule A/B: 1.1 2005 Mitsubishi Endeavor 160,000 miles Value is based on kbb.com private party value. Line from Schedule A/B: 3.1 2015 Dodge Ram 60,000 miles Value is based on kbb.com private party value. (surrendering) Line from Schedule A/B: 3.2 2008 Harley Davidson Ultra Classic (surrendering) 3ny applicable statutory limit 41 U.S.C. § 522(d)(2) 100% of fair market value, up to any applicable statutory limit 11 U.S.C. § 522(d)(2) 100% of fair market value, up to any applicable statutory limit 11 U.S.C. § 522(d)(5)	Morrison County		•	·	11 U.S.C. § 522(d)(1)
Walue is based on kbb.com private party value. Line from Schedule A/B: 3.1 2015 Dodge Ram 60,000 miles Value is based on kbb.com private party value. (surrendering) Line from Schedule A/B: 3.2 \$18,000.00 \$18,000.00 \$100% of fair market value, up to any applicable statutory limit \$0.00 \$100% of fair market value, up to any applicable statutory limit \$0.00 \$100% of fair market value, up to any applicable statutory limit	Property Legally Described as:SEE ATTACHED EXHIBIT A Value is based on property tax estimated market value.				
Value is based on kbb.com private party value. Line from Schedule A/B: 3.1 2015 Dodge Ram 60,000 miles Value is based on kbb.com private party value. (surrendering) Line from Schedule A/B: 3.2 \$18,000.00 \$18,000.00 \$100% of fair market value, up to any applicable statutory limit \$0.00 \$100% of fair market value, up to any applicable statutory limit \$0.00 \$100% of fair market value, up to any applicable statutory limit		\$3,453.00		\$3,453.00	11 U.S.C. § 522(d)(2)
Value is based on kbb.com private party value. (surrendering) Line from Schedule A/B: 3.2 2008 Harley Davidson Ultra Classic (surrendering) \$8,000.00 \$8,000.00	Value is based on kbb.com private party value.			· •	
party value. (surrendering) Line from Schedule A/B: 3.2 100% of fair market value, up to any applicable statutory limit 2008 Harley Davidson Ultra Classic (surrendering) \$8,000.00 \$8,000.00	•	\$18,000.00		\$0.00	11 U.S.C. § 522(d)(2)
(surrendering)	party value. (surrendering)			· •	
`	•	\$8,000.00		\$0.00	11 U.S.C. § 522(d)(5)
any applicable statutory limit	·			· •	

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Brian Dale Groshong Debtor 1 Debtor 2 Rachelle Valene Groshong Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 1990 Lund 16ft boat 11 U.S.C. § 522(d)(5) \$2.500.00 \$2,500.00 Line from Schedule A/B: 4.1 100% of fair market value, up to any applicable statutory limit 2007 Honda Fourtrax Foreman 11 U.S.C. § 522(d)(5) \$2,500.00 \$2,500.00 Line from Schedule A/B: 4.2 100% of fair market value, up to any applicable statutory limit 2015 Enlcosed Trailer 11 U.S.C. § 522(d)(5) \$1,500.00 \$1,500.00 Line from Schedule A/B: 4.3 100% of fair market value, up to any applicable statutory limit 1988 Weirs Pontoon 11 U.S.C. § 522(d)(5) \$5,000.00 \$5,000.00 40 HP Evinrude Motor and trailer Line from Schedule A/B: 4.4 100% of fair market value, up to any applicable statutory limit Household Goods, Furnishings, 11 U.S.C. § 522(d)(3) \$2,000.00 \$2,000.00 **Major and Minor Appliances** Line from Schedule A/B: 6.1 100% of fair market value, up to any applicable statutory limit 2-TVs, Stereo, 2-DVD Player and 11 U.S.C. § 522(d)(3) \$1,000.00 \$1,000.00 DVD's, Computer, Ipad, 2-Cell Phones, Camera, Game System 100% of fair market value, up to Line from Schedule A/B: 7.1 any applicable statutory limit **Books & Pictures** 11 U.S.C. § 522(d)(3) \$25.00 \$25.00 Line from Schedule A/B: 8.1 100% of fair market value, up to any applicable statutory limit Fishing Gear, Air Rifle 11 U.S.C. § 522(d)(5) \$500.00 \$500.00 Line from Schedule A/B: 9.1 100% of fair market value, up to any applicable statutory limit 9 mm, 40 cal handguns, `12 ga 11 U.S.C. § 522(d)(5) \$2,600.00 \$2,600.00 shotgun, 410 rifle, 22 rifle, 30.06 rifle, 17 HMR, AR 15 100% of fair market value, up to Line from Schedule A/B: 10.1 any applicable statutory limit 11 U.S.C. § 522(d)(3) Clothing \$200.00 \$200.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Clothing 11 U.S.C. § 522(d)(3) \$200.00 \$200.00 Line from Schedule A/B: 11.2 100% of fair market value, up to any applicable statutory limit

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Brian Dale Groshong Debtor 1 Debtor 2 Rachelle Valene Groshong Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Wedding Band 11 U.S.C. § 522(d)(4) \$50.00 \$50.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **Costume Jewelry & Wedding Ring** 11 U.S.C. § 522(d)(4) \$250.00 \$250.00 Line from Schedule A/B: 12.2 100% of fair market value, up to any applicable statutory limit 3 dogs named Maggie, Nino Raven 11 U.S.C. § 522(d)(3) \$20.00 \$20.00 **Cat named Twister** Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit Riding Lawnmower, Snowblower, 11 U.S.C. § 522(d)(5) \$1,000.00 \$1.000.00 Shovels, Rakes, Misc. Hand & Power Tools, Patio Furniture, Grill. 100% of fair market value, up to Line from Schedule A/B: 14.1 any applicable statutory limit Cash 11 U.S.C. § 522(d)(5) \$10.00 \$10.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking Account: Mid MN Federal 11 U.S.C. § 522(d)(5) \$110.00 **Credit Union** 100% of fair market value, up to Line from Schedule A/B: 17.1 any applicable statutory limit **Checking Account: Pine River State** 11 U.S.C. § 522(d)(5) \$350.00 Bank 100% of fair market value, up to Line from Schedule A/B: 17.2 any applicable statutory limit Pension: Preferred Pump & 11 U.S.C. § 522(d)(10)(E) \$114,716.18 **Equipment LP** 100% of fair market value, up to Line from Schedule A/B: 21.1 any applicable statutory limit CDL 11 U.S.C. § 522(d)(5) \$0.00 \$0.00 Line from Schedule A/B: 27.1 100% of fair market value, up to any applicable statutory limit Anticipated 2019 Tax Refunds 11 U.S.C. § 522(d)(5) \$0.00 \$0.00 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit **Temporary Total Disability payments** 11 U.S.C. § 522(d)(5) \$839.34 Line from Schedule A/B: 30.1 100% of fair market value, up to any applicable statutory limit **Earned Unpaid Wages** 11 U.S.C. § 522(d)(5) \$1,500.00 \$1.500.00 Line from Schedule A/B: 30.2 П 100% of fair market value, up to any applicable statutory limit

Case 19-50397 Doc 1 Filed 05/14/19 Entered 05/14/19 15:51:46 Desc Main Document Page 22 of 74 Brian Dale Groshong

De	btor 2 Rachelle Valene Groshong	Case number (if known)					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	Term Life Insurance Through Employer (No Cash Value)	\$0.00			11 U.S.C. § 522(d)(7)		
	Beneficiary: Spouse Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit			
	Term Life Insurance (no cash value) Beneficiary: Spouse	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)		
	Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit			
	Rochelle's father recently passed away, but Debtors are not expecting	Unknown		\$0.00	11 U.S.C. § 522(d)(5)		
	any inheritance Line from Schedule A/B: 32.1			100% of fair market value, up to any applicable statutory limit			
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			led on or after the date of adjustmer	nt.)		
	■ No	, , , , , , , , , , , , , , , , , , , ,			/		
	☐ Yes. Did you acquire the property covere	ed by the exemption wi	thin 1	,215 days before you filed this case	?		
	□ No						
	□ Voc						

the following described Real Estate situated

To the following described Real Estate situated in MORRISON COUNTY

No. 1.

The South Half of Southwest Quarter of Southeast Quarter $(S^{1/2} \text{ of } SW^{1/4} \text{ of } SE^{1/4})$, Section Four (4), Township One Hundred Twenty-eight (128), North of Range Thirty (30), West of the Fifth Principal Meridian.

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			Document P	age 24	of 74		
Fill ir	n this informa	tion to identify you	ır case:				
Debte	or 1	Brian Dale Gros	shona				
		First Name		ast Name			
Debte	or 2	Rachelle Valene	Groshong				
(Spous	se if, filing)	First Name		ast Name			
Unite	d States Bank	ruptcy Court for the:	DISTRICT OF MINNESOTA				
	number						
(if knov	wn)						if this is an
						ameno	led filing
	cial Form nedule D	-	Who Have Claims Se	ecured	by Property	у	12/15
is nee			If two married people are filing together, lout, number the entries, and attach it to the				
1. Do a	any creditors h	ave claims secured by	y your property?				
	No. Check t	his box and submit th	his form to the court with your other sch	nedules. You	u have nothing else to	o report on this form.	
	Yes Fill in a	Il of the information	helow		-	·	
			bolow.				
Part		Secured Claims			Column A	Column B	Column C
for ea	ch claim. If mor	e than one creditor has	more than one secured claim, list the credito a particular claim, list the other creditors in cal order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1	First Premi	er Bank	Describe the property that secures the	claim:	\$0.00	\$8,000.00	\$0.00
	Creditor's Name		2008 Harley Davidson Ultra Cla (surrendering)	assic			
	Attn: Bankr		As of the date you file, the claim is: Che	ck all that			
	Po Box 552	·	apply.	ck all triat			
-	Sioux Falls		☐ Contingent				
	Number, Street, C	ity, State & Zip Code	Unliquidated				
Who	owes the debt	? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ De	ebtor 1 only		☐ An agreement you made (such as more	tgage or secu	ired		
_	ebtor 2 only		car loan)				
_	ebtor 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
☐ At	least one of the	debtors and another	☐ Judgment lien from a lawsuit				
	neck if this clai		Other (including a right to offset)				
		Opened					

2002

Last 4 digits of account number

11/06/14 Last Active

Date debt was incurred 3/05/19

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Debtor 1 Brian Dale Groshong		Case number (if known)		
	e Name Last Name			
Debtor 2 Rachelle Valene Gros				
First Name Middi	e Name Last Name			
2.2 First Premier Bank	Describe the property that secures the claim:	\$22,239.89	\$18,000.00	\$4,239.89
Creditor's Name	2015 Dodge Ram 60,000 miles		· ,	· ,
	Value is based on kbb.com private			
	party value. (surrendering)			
	Loan also inclused 2008 Harley			
	Davidson Ultra Classic			
Attn: Bankruptcy Dept	(surrendering)			
Po Box 5524	As of the date you file, the claim is: Check all that apply.			
Sioux Falls, SD 57117	☐ Contingent			
Number, Street, City, State & Zip Code	□ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or see	ecured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	_			
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt	· · · · · · · · · · · · · · · · · · ·			
0				
Opened 4/01/15				
Last Activ	<u>a</u>			
Date debt was incurred 3/05/19	Last 4 digits of account number 2002			
2.3 Planet Home Lending, L	Describe the property that secures the claim:	\$126,382.54	\$90,100.00	\$36,282.54
Creditor's Name	9642 110th St Little Falls, MN 56345	Ψ120,302.34	φ30,100.00	φ30,202.3 4
	Morrison County			
	Debtor's Residence: Homestead			
	Real Property Legally Described			
	as:SEE ATTACHED EXHIBIT A			
	Value is based on property tax			
	estimated market value.			
10 Research Pkwy	As of the date you file, the claim is: Check all that apply.			
Wallingford, CT 06492	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or see	ecured		
Debtor 2 only	car loan)	-		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	_ , ,			
☐ Check if this claim relates to a	Other (including a right to offset) First Mort	gage		
community debt	— Other (including a right to offset)			
Opened				
2/22/11 Last Activ	Δ.			
Date debt was incurred 4/02/19	Last 4 digits of account number 6147			
40L/13				
				
Add the deller value of variance and the		¢4.40.600	42	
-	n Column A on this page. Write that number here:	\$148,622.4 \$148,622.4		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more

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Debtor 1	Brian Dale Grosh	ong		Case number (if known)	
	First Name	Middle Name	Last Name		
Debtor 2	Rachelle Valene C	Groshong			
	First Name	Middle Name	Last Name		

than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		-		Document	Page 27 of 7	'4		. • • • • • • • • • • • • • • • • • • •
Fil	l in this inform	ation to identify your	case:					
De	ebtor 1	Brian Dale Grosh	ona					
		First Name	Middle	Name	Last Name			
-	btor 2	Rachelle Valene (
(Sp	ouse if, filing)	First Name	Middle	Name	Last Name			
Un	ited States Bar	kruptcy Court for the:	DISTRICT	OF MINNESOTA				
	se number							
(if k	nown)							if this is an
							amend	ed filing
∩f	ficial Form	106F/F						
		/F: Creditors W	ho Have	lineacurad	Claime			12/15
		accurate as possible. Us					DDIODITY . I	
Sch left. nan	edule D: Credito Attach the Cont ne and case num	•	ured by Prope je. If you have	erty. If more space is no information to re	needed, copy the Part	you need, fill it out,	number the entries in	n the boxes on the
		of Your PRIORITY Un						
1.		rs have priority unsecure	d claims agai	nst you?				
	☐ No. Go to Pa	art 2.						
	Yes.							
2.	identify what typ possible, list the	priority unsecured claims to of claim it is. If a claim has claims in alphabetical orde than one creditor holds a pa	as both priority er according to	and nonpriority amour the creditor's name. If	nts, list that claim here a f you have more than two	nd show both priority a	nd nonpriority amount	ts. As much as
	(For an explana	tion of each type of claim, s	see the instruc	tions for this form in the	e instruction booklet.)			
						Total claim	Priority amount	Nonpriority amount
2.1	Internal	Revenue Service	1	Last 4 digits of accou	int number	\$8.275.17	\$8,275.17	\$0.00
2.1		ditor's Name		Last 4 digits of accor		φυ,273.17	φ0,273.17	φυ.υυ
		zed Insolvency	,	When was the debt in	ncurred?		_	
	PO Box		_					
		phia, PA 19101-7340 reet City State Zip Code		As of the date you file	e, the claim is: Check a	II that apply		
		the debt? Check one.		Contingent	e, the claim is. Check a	іі шасарріу		
	Debtor 1 or			_				
	Debtor 2 or			Unliquidated				
	_			Disputed				
	Debtor 1 ar	nd Debtor 2 only		Type of PRIORITY un —				
	☐ At least one	e of the debtors and anothe	er	☐ Domestic support of	bligations			
	☐ Check if th	nis claim is for a commu	nity debt	Taxes and certain of	other debts you owe the	government		
		ubject to offset?		\square Claims for death or	personal injury while yo	u were intoxicated		
	■ No			Other. Specify				

☐ Yes

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ebtor 2 Rachelle Valene Groshong		Case number (if known)		
2 MN Dept of Revenue	Last 4 digits of account number	\$623.71	\$623.71	\$0.0
Priority Creditor's Name Attn: Denise Jones PO Box 64447	When was the debt incurred?			
Saint Paul, MN 55164				
Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply		
Who incurred the debt? Check one.	☐ Contingent			
Debtor 1 only	☐ Unliquidated			
☐ Debtor 2 only	☐ Disputed			
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ At least one of the debtors and another	☐ Domestic support obligations			
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you	owe the government		
Is the claim subject to offset?	☐ Claims for death or personal injury	while you were intoxicated		
■ No	☐ Other. Specify			
Yes				
 No. You have nothing to report in this part. Submit ■ Yes. 	this form to the court with your other sch	edules.		
 No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. 	alphabetical order of the creditor who laim. For each claim listed, identify what	b holds each claim. If a creditor ha	already included in Par	t 1. If more n Page of
□ No. You have nothing to report in this part. Submit □ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. Bank Of America Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50	alphabetical order of the creditor who laim. For each claim listed, identify what i creditors in Part 3.If you have more than	o holds each claim. If a creditor ha type of claim it is. Do not list claims three nonpriority unsecured claims	already included in Par fill out the Continuation Total clair	t 1. If more n Page of
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. Bank Of America Nonpriority Creditor's Name 4909 Savarese Circle	alphabetical order of the creditor who laim. For each claim listed, identify what is creditors in Part 3.lf you have more than Last 4 digits of account number	o holds each claim. If a creditor hat the pype of claim it is. Do not list claims three nonpriority unsecured claims 4521 Opened 08/15 Last Active 6/30/17	already included in Par fill out the Continuation Total clair	t 1. If more n Page of
□ No. You have nothing to report in this part. Submit □ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. Bank Of America Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634 Number Street City State Zip Code	alphabetical order of the creditor who laim. For each claim listed, identify what creditors in Part 3.lf you have more than Last 4 digits of account number When was the debt incurred?	o holds each claim. If a creditor hat the pype of claim it is. Do not list claims three nonpriority unsecured claims 4521 Opened 08/15 Last Active 6/30/17	already included in Par fill out the Continuation Total clair	t 1. If more n Page of
□ No. You have nothing to report in this part. Submit: □ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. Bank Of America Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634 Number Street City State Zip Code Who incurred the debt? Check one.	alphabetical order of the creditor who laim. For each claim listed, identify what creditors in Part 3.lf you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim	o holds each claim. If a creditor hat the pype of claim it is. Do not list claims three nonpriority unsecured claims 4521 Opened 08/15 Last Active 6/30/17	already included in Par fill out the Continuation Total clair	t 1. If more n Page of
□ No. You have nothing to report in this part. Submit □ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. 1 Bank Of America Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only	alphabetical order of the creditor who aim. For each claim listed, identify what creditors in Part 3.lf you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim	o holds each claim. If a creditor hat the pype of claim it is. Do not list claims three nonpriority unsecured claims 4521 Opened 08/15 Last Active 6/30/17	already included in Par fill out the Continuation Total clair	t 1. If more n Page of
□ No. You have nothing to report in this part. Submit □ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. 1 Bank Of America Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	alphabetical order of the creditor who laim. For each claim listed, identify what creditors in Part 3.lf you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated	b holds each claim. If a creditor hat type of claim it is. Do not list claims three nonpriority unsecured claims 4521 Opened 08/15 Last Active 6/30/17 is: Check all that apply	already included in Par fill out the Continuation Total clair	t 1. If more n Page of
□ No. You have nothing to report in this part. Submit: □ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Bank Of America Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	alphabetical order of the creditor who laim. For each claim listed, identify what creditors in Part 3.lf you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed	b holds each claim. If a creditor hat type of claim it is. Do not list claims three nonpriority unsecured claims 4521 Opened 08/15 Last Active 6/30/17 is: Check all that apply	already included in Par fill out the Continuation Total clair	t 1. If more n Page of
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. Bank Of America Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	alphabetical order of the creditor who laim. For each claim listed, identify what creditors in Part 3.lf you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecured	b holds each claim. If a creditor hat type of claim it is. Do not list claims three nonpriority unsecured claims 4521 Opened 08/15 Last Active 6/30/17 is: Check all that apply	already included in Par fill out the Continuation Total clair	t 1. If more n Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. Bank Of America Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	alphabetical order of the creditor who aim. For each claim listed, identify what creditors in Part 3.lf you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separation.	b holds each claim. If a creditor hat type of claim it is. Do not list claims three nonpriority unsecured claims 4521 Opened 08/15 Last Active 6/30/17 is: Check all that apply d claim:	already included in Par fill out the Continuation Total clair	t 1. If more n Page of

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	Brian Dale Groshong Rachelle Valene Groshong		Case number (if known)	
	Capital One / Menard Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number	4580 Opened 3/09/11 Last Active	\$2,814.00
	Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	9/11/18	
_	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
	Cavalry Portfolio Services	Last 4 digits of account number	7799	\$1,921.47
	Nonpriority Creditor's Name Attn: Bankruptcy Department 500 Summit Lake Ste 400 Valhalla, NY 10595	When was the debt incurred?	Opened 10/20/18	
_	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Collection	Attorney Synchrony Bank	
	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	2642	\$2,042.57
	Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 1/01/14 Last Active 1/18/16	
_	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	Yes	■ Other. Specify Credit Card	<u> </u>	

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	Brian Dale Groshong Rachelle Valene Groshong		Case number (if known)	
	Chase Card Services Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number	9392 Opened 1/28/03 Last Active	\$2,340.12
-	Po Box 15298 Wilmington, DE 19850 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	1/17/16 s: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card	<u> </u>	
	Citi/Sears Nonpriority Creditor's Name	Last 4 digits of account number	1629	\$0.00
	Citibank/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 10/21/10 Last Active 11/22/17	
=	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
	Citibank	Last 4 digits of account number	8229	\$0.00
	Nonpriority Creditor's Name Centralized Bankruptcy Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 6/04/13 Last Active 10/18/17	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	

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	1 Brian Dale Groshong 2 Rachelle Valene Groshong		Case number (if known)	
4.8	Citizens Ntl Bk	Last 4 digits of account number	7680	\$0.00
	Nonpriority Creditor's Name	_		Ψ0.00
	Po Box 231 Park Rapids, MN 56470	When was the debt incurred?	Opened 6/18/14 Last Active 10/31/14	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile	9	
4.9	Commerce Bank	Last 4 digits of account number	6279	\$4,382.02
	Nonpriority Creditor's Name Attn: Bankruptcy /KC- Rec -10 Po Box 419248 Kansas City, MO 64141	When was the debt incurred?	Opened 08/14 Last Active 3/07/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin		
	Yes	■ Other. Specify Credit Card County 49-	l; Judgment entered in Morrison CV-18-522	
4.1	Discover Financial	Lock A divite of account number	7755	\$6,640.94
0	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ0,040.34
	Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 3/20/07 Last Active 1/29/19	
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	— NO		l; Summons and Complaint	
	Yes		MOrrison County	

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	1 Brian Dale Groshong 2 Rachelle Valene Groshong		Case number (if known)	
4.1	First National Bank	Last 4 digits of account number	4256	\$1,861.90
	Nonpriority Creditor's Name Attn: Bankruptcy 1620 Dodge St Mailstop 4440 Omaha, NE 68197 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	Opened 2/01/15 Last Active 9/04/18	
	Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only	☐ Contingent		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin	aration agreement or divorce that you did not	
	□ Yes	Other. Specify Credit Card		
4.1	Freedom Debt Relief, LLC	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name 4940 S Wendler Dr Tempe, AZ 85282 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim in	is. Check all that apply	
	Who incurred the debt? Check one. □ Debtor 1 only	☐ Contingent	G. Offeck all that apply	
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sone	d claim:	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin		
	Yes	Other. Specify Debt Conso	olidation	
4.1 3	Gray Plant & Mooty Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00
	1010 West St. Germain Street Saint Cloud, MN 56301-3406	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d alaim.	
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans	a Ciaiii.	
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		

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	1 Brian Dale Groshong 2 Rachelle Valene Groshong					
4.1 4	HSBC Bank	Last 4 digits of account number	3303	\$0.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 2013 Buffalo, NY 14240	When was the debt incurred?	Opened 01/08 Last Active 6/21/09			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	<u> </u>			
4.1	Messerli & Kramer	Last 4 digits of account number	9793	\$0.00		
	Nonpriority Creditor's Name 3033 Campus Drive Suite 250	When was the debt incurred?				
	Plymouth, MN 55441-2662 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed	A status			
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify attorney fo	r Commerce bank			
4.1 6	Mid-central Fed Saving Nonpriority Creditor's Name	Last 4 digits of account number	3611	\$0.00		
	520 Jefferson St S Wadena, MN 56482	When was the debt incurred?	Opened 10/07 Last Active 4/03/19			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	■ Other. Specify Debtors do possession	o not occupy property; In n of ex spouse of Debtor 2			

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	Brian Dale Groshong Rachelle Valene Groshong	Case number (if known)	
4.1 7	Nationwide Credit	Last 4 digits of account number 1037	\$0.00
	Nonpriority Creditor's Name PO BOX 14581	When was the debt incurred?	
	Des Moines, IA 50306 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collecting for Synchrony Bank/Walmart	
·	Rausch,Sturm,Israel,Enerson&H	Last 4 digits of account number 5003	\$0.00
	Nonpriority Creditor's Name 3209 W 76th St, Suite 301 Minneapolis, MN 55435	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify attorney for Citibank	
4.1	Robert S. Gitmeid & Assoc. PLL	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 11 Broadway #1677 New York, NY 10004	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Debt Consolidation	

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	or 2 Rachelle Valene Groshong		Case number (if known)	
4.2 0	Scheels Visa	Last 4 digits of account number	3345	\$0.00
<u>J</u>	Nonpriority Creditor's Name PO BOX 2557	When was the debt incurred?		****
	Omaha, NE 68103			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only			
	Debtor 2 only	Contingent		
		Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
	At least one of the debtors and another	Student loans	a ciaim:	
	☐ Check if this claim is for a community debt	_	vestion agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card		
4.2				
1	Social Security Adminstration Nonpriority Creditor's Name	Last 4 digits of account number	75A0	\$39,603.00
	Office of Regional Commissioner 26 Federal Plaza Rm 40-120	When was the debt incurred?	Opened 10/18 Last Active 10/22/18	
	New York, NY 10278 Number Street City State Zip Code		in Ohada Habatanah	
	Who incurred the debt? Check one.	As of the date you file, the claim	s: Cneck all that apply	
	Debtor 1 only	Пол		
	■ Debtor 2 only	☐ Contingent☐ Unliquidated		
		<u> </u>		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another	☐ Student loans	- Old	
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Government	nt Overpayment	
4.2	The Bureaus	Local A district of account numbers	5442	\$3,092.62
2	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ0,002.02
	650 Dundee Road Suite 370	650 Dundee Road When was the debt incurred?		
	Northbrook, IL 60062 Number Street City State Zip Code	As of the date you file, the claim	is. Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Collection	Attorney for Capital One	

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Rachelle Valene Groshong	Case number (if known)	
Verizon Wireless	Last 4 digits of account number	\$72.38
Nonpriority Creditor's Name Bankruptcy Dept 500 Technology Dr., Suite 500 Weldon Spring, MO 63304	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Services	
Wadena County	Last 4 digits of account number	\$15,922.20
Nonpriority Creditor's Name 415 South Jefferson Street Wadena, MN 56482	When was the debt incurred?	· ,
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	•	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Judicial/Wadena - restitution	
Li res	Other. Specify Oddicial/Waderia - Testitution	
Wilford, Geske & Cook	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name 7616 Currell Blvd Suite 200	When was the debt incurred?	
Woodbury, MN 55215-4393		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	□ Occidence t	
Debtor 2 only	☐ Contingent ☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify	
	· · ·	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 2	Rachelle Valene Groshong	Case number (if known)	
Debtor 1	Brian Dale Groshong		

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
Total	6a.	Domestic support obligations	6a.	\$	0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	8,898.88
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	8,898.88
				Т	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that			
	og.	you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	80,693.22
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	80,693.22

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Fill in this infor	mation to identify your	case:		
Debtor 1	Brian Dale Grosh	iong		
	First Name	Middle Name	Last Name	
Debtor 2	Rachelle Valene	Groshong		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MINNES	ОТА	
Case number (if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Verizon Wireless
Bankruptcy Dept
500 Technology Dr., Suite 500
Weldon Spring, MO 63304

State what the contract or lease is for
cell phone contract

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		Doddine	iit i age oo o	1 1 - 1
Fill in this	information to identify your	case:		
Debtor 1	Brian Dale Grosh	ong		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	Rachelle Valene (Groshong Middle Name	Last Name	
	tes Bankruptcy Court for the:	DISTRICT OF MINNES	OTA	
			-	
Case numb	ber			☐ Check if this is an
				amended filing
Official	I Form 106H			
	ule H: Your Cod	obtors		12/15
Jeneu	die II. Tour Cou	CDIOI 3		12/13
No Yes 2. With Arizon: No. Yes 3. In Colin line	nin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spou umn 1, list all of your codebt 2 again as a codebtor only i	I lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guaran	operty state or territory erto Rico, Texas, Washi e with you at the time? spouse as a codebtor tor or cosigner. Make s	y? (Community property states and territories include
(Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
١	Name, Number, Street, City, State and Z	IP Code		Check all schedules that apply:
3.1				☐ Schedule D, line
1	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street City	State	ZIP Code	_
		- Claic	211 0000	
3.2				☐ Schedule D, line
	Name			Schedule E/F, line
				☐ Schedule G, line
	Number Street			_
(City	State	ZIP Code	

Fill in this information	n to identify your case:	
Debtor 1	Brian Dale Groshong	
Debtor 2 (Spouse, if filing)	Rachelle Valene Groshong	
United States Bankr	uptcy Court for the: DISTRICT OF MINNESOTA	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter
Official Forr	n 106 <u>l</u>	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Truck Driver Human Resources Director** Include part-time, seasonal, or **Employer's name Preferred Pump Little Falls Health Services** self-employed work. **Employer's address** Occupation may include student 2201 Scott Ave, Ste 100 1200 NE 1st Ave or homemaker, if it applies. Fort Worth, TX 76103 Little Falls, MN 56345 How long employed there? 18 years 1 year

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3,946.00 3.520.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. +\$ 3. 500.00 0.00 Calculate gross Income. Add line 2 + line 3. 4. 4,020.00 3,946.00

Official Form 106I Schedule I: Your Income page 1

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Brian Dale Groshong Debtor 1 Debtor 2 Rachelle Valene Groshong Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4.020.00 3.946.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 1,184.00 990.00 Mandatory contributions for retirement plans 5b. 5b. \$ 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 410.00 0.00 Required repayments of retirement fund loans 5d. 5d. \$ 0.00 0.00 5e. Insurance 5e. 179.00 263.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5g. **Union dues** 5g. \$ \$ 0.00 0.00 5h. Other deductions. Specify: 5h.+ \$ 0.00 \$ 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,773.00 1,253.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 7 \$ 2,247.00 2,693.00 8 List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. \$ 0.00 0.00 8a \$ 8h. Interest and dividends 8b. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. \$ \$ 0.00 Specify: 0.00 8g. 8g. Pension or retirement income \$ \$ 0.00 0.00 Other monthly income. Specify: VA Disability 8h.+ \$ 8h. \$ 130.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 \$ 0.00 130.00 10. \$ \$ 10. Calculate monthly income. Add line 7 + line 9. 2,377.00 2,693.00 \$ 5,070.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 0.00 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 5,070.00 12. \$ applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No.

Yes. Explain:

Brian Groshong currently is on temporary total disability from his employer and is doing rehabilitation after shoulder surgery. These income figures are based on his ordinary wages.

Fill	in this informa	ation to identify ye	our case:					
Deb	tor 1	Brian Dale G	Groshona			Che	eck if this is:	
	otor 2	Rachelle Va						wing postpetition chapter f the following date:
` '	, 0,	wonters Court for the	. DISTRI	CT OF MININESOTA			MM / DD / YYYY	
Unit	ed States Bank	ruptcy Court for the	E. DISTRI	CT OF MINNESOTA			MIMI / DD / YYYY	
1	e number nown)							
		orm 106J						
		J: Your						12/1
info	ormation. If m	and accurate as nore space is ne n). Answer eve	eded, atta	If two married people ar ch another sheet to this n.	e filing together, be form. On the top of	oth are eq any addit	ually responsible f tional pages, write	or supplying correct your name and case
Par		ribe Your House	ehold					
1.	Is this a join							
	□ No. Go to		in a conor	ata haysahald?				
		es Debtor 2 live	ın a separ	ate nousenoid?				
	■ N		st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of De	ebtor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						Yes
								□ No □ Yes
								_ □ res □ No
								☐ Yes
								□ No
2	Da							☐ Yes
3.	expenses of	penses include of people other t od your depende	than $_{oldsymbol{\square}}$	No Yes				
exp	imate your e	a date after the	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> Y			Your exp	penses
4.		or home owners nd any rent for th		ses for your residence. In	nclude first mortgage	e 4.	\$	600.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
	4b. Prope	erty, homeowner'	s, or renter	's insurance		4b.	·	0.00
				ipkeep expenses		4c.	· ———	170.00
5		eowner's associa		dominium dues our residence, such as ho	me equity loans	4d. 5	·	0.00

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Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: od and housekeeping supplies ildcare and children's education costs othing, laundry, and dry cleaning sonal care products and services dical and dental expenses insportation. Include gas, maintenance, bus or train fare. not include car payments. itertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations urance.	6a. 6b. 6c. 6d. 7. 8. 9. 10. 11.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	380.00 184.00 380.00 0.00 600.00 0.00 139.00 129.00 555.00
Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: od and housekeeping supplies ildcare and children's education costs thing, laundry, and dry cleaning rsonal care products and services dical and dental expenses nsportation. Include gas, maintenance, bus or train fare. not include car payments. tertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations	6b. 6c. 6d. 7. 8. 9. 10. 11.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	184.00 380.00 0.00 600.00 0.00 139.00 129.00 555.00
Telephone, cell phone, Internet, satellite, and cable services Other. Specify: od and housekeeping supplies Ildcare and children's education costs Ithing, laundry, and dry cleaning Isonal care products and services Idical and dental expenses Insportation. Include gas, maintenance, bus or train fare. Include car payments. Itertainment, clubs, recreation, newspapers, magazines, and books Introduction of the contributions and religious donations	6c. 6d. 7. 8. 9. 10. 11. 12.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	380.00 0.00 600.00 0.00 139.00 129.00 555.00
Other. Specify: od and housekeeping supplies ildcare and children's education costs thing, laundry, and dry cleaning sonal care products and services dical and dental expenses nsportation. Include gas, maintenance, bus or train fare. not include car payments. tertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations	6d. 7. 8. 9. 10. 11. 12.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 600.00 0.00 139.00 129.00 555.00
od and housekeeping supplies ildcare and children's education costs thing, laundry, and dry cleaning sonal care products and services dical and dental expenses nsportation. Include gas, maintenance, bus or train fare. not include car payments. tertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations	7. 8. 9. 10. 11. 12.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	600.00 0.00 139.00 129.00 555.00
Idcare and children's education costs Ithing, laundry, and dry cleaning Isonal care products and services Idical and dental expenses Insportation. Include gas, maintenance, bus or train fare. Include car payments. Itertainment, clubs, recreation, newspapers, magazines, and books Introductions and religious donations	8. 9. 10. 11. 12.	\$	0.00 139.00 129.00 555.00
thing, laundry, and dry cleaning sonal care products and services dical and dental expenses asportation. Include gas, maintenance, bus or train fare. not include car payments. sertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations	9. 10. 11. 12. 13.	\$ \$ \$ \$	139.00 129.00 555.00
sonal care products and services dical and dental expenses nsportation. Include gas, maintenance, bus or train fare. not include car payments. sertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations	10. 11. 12. 13.	\$ \$ \$	129.00 555.00
dical and dental expenses nsportation. Include gas, maintenance, bus or train fare. not include car payments. rertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations	11. 12. 13.	\$	555.00
nsportation. Include gas, maintenance, bus or train fare. not include car payments. rertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations	12. 13.	\$	
not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations	13.	· · · · · · · · · · · · · · · · · · ·	550.00
ertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations	13.	· · · · · · · · · · · · · · · · · · ·	ວວບ.ບບ
aritable contributions and religious donations			
•		\$	140.00
urance.	14.	\$	60.00
	150	¢	400.00
		·	120.00
		*	0.00
		·	218.00
· · ·	150.	\$	0.00
ecify: Vehicle Registration	16.	\$	50.00
	47-	•	400.00
		·	400.00
• •		·	0.00
		*	0.00
• •		\$	0.00
		•	0.00
	1).	·	0.00
	40	a	0.00
<u> </u>		our Incomo	
· · · · ·			0.00
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		,	
•	21.	+\$	120.00
· · · · · · · · · · · · · · · · · · ·		\$	4,795.00
· · · · · · · · · · · · · · · · · · ·	2		4,7 33.00
	_	l :	
		\$	4,795.00
	00	c	F 070 00
		·	5,070.00
o. Copy your monthly expenses from line 22c above.	23b.	-\$	4,795.00
Subtract your monthly expenses from your monthly income.	230	\$	275.00
	not include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Other insurance. Specify: Les. Do not include taxes deducted from your pay or included in lines 4 or 20. Life insurance. Other insurance. Specify: Les. Do not include taxes deducted from your pay or included in lines 4 or 20. Lecify: Vehicle Registration Lealiment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Lother. Specify: Lother. Specify: Lother specify: Lother payments of alimony, maintenance, and support that you did not report flucted from your pay on line 5, Schedule I, Your Income (Official Form 106 liter payments you make to support others who do not live with you. Lecify: Let real property expenses not included in lines 4 or 5 of this form or on Science real property expenses not included in lines 4 or 5 of this form or on Science real property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues Let Expenses Culate your monthly expenses Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J- Add line 22a and 22b. The result is your monthly expenses. Culate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy line 12 (your combined monthly income) from Schedule I.	aritable contributions and religious donations urance. Life insurance deducted from your pay or included in lines 4 or 20. Life insurance 15a. Health insurance 15b. Health insurance 15c. Other insurance Specify: 15c. Other insurance sequenters: Corporate of Vehicle Registration 15c. Italiment or lease payments: Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. Other. Specify: 17c. Other payments of alimony, maintenance, and support that you did not report as lucted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). 18c. For payments you make to support others who do not live with you. Selfy: 17c. Mortgages on other property 20a. Maintenance, repair, and upkeep expenses 20b. Homeowner's association or condominium dues 20c. Maintenance, repair, and upkeep expenses 20d. Homeowner's association or condominium dues 20c. Mortgages on other property 20c. Culate your monthly expenses 20d. Add lines 24 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. Add line 22a and 22b. The result is your monthly expenses. Culate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Subtract your monthly expenses from line 22c above. 23b. Subtract your monthly expenses from your monthly income.	aritable contributions and religious donations urance. Life insurance deducted from your pay or included in lines 4 or 20. Life insurance 15a. \$ Health insurance 15b. \$ Vehicle insurance, Specify: 15d. \$ Ses. Do not include taxes deducted from your pay or included in lines 4 or 20. Life insurance, Specify: 15d. \$ Ses. Do not include taxes deducted from your pay or included in lines 4 or 20. Lotify: Vehicle Registration 16. \$ Sallment or lease payments: 17a. \$ Car payments for Vehicle 2 17b. \$ Other. Specify: 17c. \$ Other. Specify: 17c. \$ Other. Specify: 17d. \$ Ir payments of alimony, maintenance, and support that you did not report as lucted from your pay on line 5, Schedule 1, Your Income (Official Form 106I). Ser payments you make to support others who do not live with you. Ser payments you make to support others who do not live with you. Ser real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. Mortgages on other property 20a. \$ Real estate taxes 20b. \$ Real estate taxes 20b. \$ Maintenance, repair, and upkeep expenses 20d. \$ Maintenance, repair, and upkeep expenses 20d. \$ Maintenance, repair, and upkeep expenses 20d. \$ Add lines 4 through 21. \$ Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ Add lines 22a and 22b. The result is your monthly expenses. Cultate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ Copy your monthly expenses from line 22c above. 23b. \$ Subtract your monthly expenses from your monthly income.

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here: Debtors have medical issues reulting in out of pocket medical expenses, and vehicle payments are estimated because debtors are surrendering their current truck and motorcycle in the bankruptcy. Debtor's have significant health issues resulting in out of pocket medical expenses.

Fill in this infor	mation to identify your	case.				
Debtor 1	Brian Dale Grosh	Middle Name	Lact	Name		
Dalatan			Lasi	Name		
Debtor 2	Rachelle Valene		1 1	Mana		
(Spouse if, filing)	First Name	Middle Name	Last	Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF MINNESOTA				
Casa number						
Case number (if known)						☐ Check if this is an amended filing
f two married performance of the file this betaining money	eople are filing togethe s form whenever you fi	n connection with a bankruptcy	or su	upplyi	ng correct information. edules. Making a false st	12/15 atement, concealing property, or ,000, or imprisonment for up to 20
Sign	n Below					
Did you pa	y or agree to pay some	eone who is NOT an attorney to I	help	you fi	II out bankruptcy forms?	
■ No						
☐ Yes. N	Name of person					ankruptcy Petition Preparer's Notice, ion, and Signature (Official Form 119)
•	lty of perjury, I declare e true and correct.	that I have read the summary ar	nd so	chedu	les filed with this declara	ation and
X /s/ Bria	an Dale Groshong		Х	/s/ R	achelle Valene Grosh	ona
	Dale Groshong				nelle Valene Groshono	· ·
	re of Debtor 1				ture of Debtor 2	•
Date	May 14, 2019			Date	May 14, 2019	

Filli	n this inform	nation to identify you	case:			
Deb	tor 1	Brian Dale Gros	hong			
		First Name	Middle Name	Last Name		
	tor 2 se if, filing)	Rachelle Valene First Name	Groshong Middle Name	Last Name		
Unite	ed States Bar	kruptcy Court for the:	DISTRICT OF MINNESO	TA		
Case	e number					
(if kno						heck if this is an mended filing
Ott	icial Fau	m 107				
	icial For I tement		Affairs for Individ	duals Filing for B	ankruptcy	4/19
infor	mation. If mo	ore space is needed,). Answer every ques	attach a separate sheet to	this form. On the top of any	equally responsible for sup y additional pages, write you	
1.	What is your	current marital statu	s?			
	■ Married □ Not mar	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	all of the places you I	ved in the last 3 years. Do no	ot include where you live now	ı.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
				,		
Part	2 Explain	n the Sources of You	r Income			
	Fill in the tota	I amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$14,821.48	■ Wages, commissions, bonuses, tips	\$17,306.80
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Brian Dale Groshong Pebtor 2 Rachelle Valene Grosho	ong	Cas	e number (if known)	
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$52,456.41	■ Wages, commissions, bonuses, tips	\$44,383.57
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$53,443.81	■ Wages, commissions, bonuses, tips	\$42,000.75
	☐ Operating a business		☐ Operating a business	
List each source and the gross inco No Yes. Fill in the details.	me from each source separa	tely. Do not include income t	hat you listed in line 4.	
Tes. Fill III the details.				
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	VA Disability	\$650.00		
	Short Term Disability	\$5,875.00		
For last calendar year: (January 1 to December 31, 2018)	VA Disability	\$1,560.00	Social Security Benefits	\$9,944.00
	IRA Distribution	\$3,878.00		
For the calendar year before that: (January 1 to December 31, 2017)	VA Disability	\$0.00	Social Security Benefits	\$14,567.00
Part 3: List Certain Payments You	Made Before You Filed for	Bankruptcy		
		ımer debts. Consumer debt	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an
During the 90 days befo No. Go to line 7	re you filed for bankruptcy, di	d you pay any creditor a tota	I of \$6,825* or more?	
☐ Yes List below e paid that cre	each creditor to whom you pai	nts for domestic support oblig	n one or more payments and pations, such as child support	

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Entered 05/14/19 15:51:46 Case 19-50397 Doc 1 Filed 05/14/19 Desc Main Page 47 of 74 Document Debtor 1 **Brian Dale Groshong** Debtor 2 Rachelle Valene Groshong Case number (if known) Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address Total amount Amount vou Reason for this payment Dates of payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment Reason for this payment Total amount Amount you Include creditor's name paid still owe Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number **Commerce Bank vs BRIAN CIVIL JUDGMENT MORRISON COUNTY** □ Pending **GROSHONG DISTRICT COURT** □ On appeal 49-CV-18-522 □ Concluded Discover Bank v. brain D. Civil **Morrison County District** ☐ Pending Groshong Court □ On appeal 213 1st Avenue Southeast □ Concluded Little Falls, MN 56345 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.

Describe the Property

Explain what happened

Creditor Name and Address

Value of the

property

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	btor 1 Brian Dale Groshong Rachelle Valene Groshong		Case number	(if known)	
	Creditor Name and Address		Describe the Property	Date	Value of the
		E	Explain what happened		property
	Commerce Bank Attn: Bankruptcy /KC- Rec -10	V	Vages	February 2019	\$0.00
	Po Box 419248		Property was repossessed.		
	Kansas City, MO 64141		☐ Property was foreclosed.		
		_	Property was garnished.		
			☐ Property was attached, seized or levied.		
11.	accounts or refuse to make a payment No		y, did any creditor, including a bank or financial in se you owed a debt?	stitution, set off any a	amounts from your
	Yes. Fill in the details.				
	Creditor Name and Address		Describe the action the creditor took	Date action was taken	Amount
13.	■ No □ Yes. Fill in the details for each gift. Gifts with a total value of more than \$6 per person	600	, did you give any gifts with a total value of more to Describe the gifts	han \$600 per person? Dates you gave the gifts	? Value
	Person to Whom You Gave the Gift an Address:	ıd			
14.	Within 2 years before you filed for bank No Yes. Fill in the details for each gift or		, did you give any gifts or contributions with a tota ution.	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed	Dates you contributed	Value
Pa	rt 6: List Certain Losses				
15.	Within 1 year before you filed for banks or gambling?	ruptcy	or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster
	■ No				
	☐ Yes. Fill in the details.				
	Describe the property you lost and	Desc	cribe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred		de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	loss	lost

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	btor 1 btor 2	Brian Dale Groshong Rachelle Valene Groshong		Case numbe	(if known)		
Pa	rt 7:	List Certain Payments or Transfers					
16.	consi	n 1 year before you filed for bankruptcy, di ulted about seeking bankruptcy or prepari de any attorneys, bankruptcy petition preparer	ng a bankruptcy petition?			rty to anyone you	
	_	No Yes. Fill in the details.					
	Pers Addi Ema	on Who Was Paid	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment	
		cus Credit Counseling				\$15.00	
	Sag	e Personal Financial Mgmt				\$15.00	
17.	prom Do no	n 1 year before you filed for bankruptcy, di ised to help you deal with your creditors o ot include any payment or transfer that you list	or to make payments to your creditors		or transfer any prope	rty to anyone who	
		Yes. Fill in the details. son Who Was Paid ress	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment	
18.	Includ	ferred in the ordinary course of your busing both outright transfers and transfers made	e years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, ot red in the ordinary course of your business or financial affairs? both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your gifts and transfers that you have already listed on this statement.				
		Yes. Fill in the details.	Description and value of	Describe	any property or	Date transfer was	
	Addı	ress	property transferred		s received or debts	made	
		on's relationship to you d Party	2005 Dutchman Colorado was sold with permission from the the lienholder (First Premier Bank) and the Chapter 13 Bankruptcy Trustee	\$7,500/\$	37500	April 2019	
19.	benef	n 10 years before you filed for bankruptcy, ficiary? (These are often called asset-protect		elf-settled t	rust or similar device	of which you are a	
		Yes. Fill in the details.					
	Nam	e of trust	Description and value of the prope	erty transfei	red	Date Transfer was made	

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Debtor 1 Debtor 2				Case nu	mber (if known)	
Part 8:	List of Certain Financial Accounts, In	nstruments, Safe Depos	it Boxes, and S	torage Un	its	
solo Incl	hin 1 year before you filed for bankrupted, moved, or transferred? ude checking, savings, money market, ses, pension funds, cooperatives, asso No Yes. Fill in the details.	or other financial accou	ınts; certificate	s of depos	•	•
	me of Financial Institution and dress (Number, Street, City, State and ZIP le)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
PC	d MN Federal Credit Union) Box 2907 xter, MN 56425	xxxx-	■ Checking □ Savings □ Money Ma □ Brokerage □ Other		September 2018	\$500.00
	you now have, or did you have within 1 h, or other valuables? No Yes. Fill in the details.	year before you filed fo	r bankruptcy, a	ny safe do	eposit box or other depo	sitory for securities,
	me of Financial Institution dress (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	e the contents	Do you still have it?
22. Hav ■	re you stored property in a storage unit No Yes. Fill in the details.	or place other than you	r home within	l year befo	ore you filed for bankrup	tcy?
	me of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	e the contents	Do you still have it?
Part 9:	Identify Property You Hold or Contro	I for Someone Else				
_	you hold or control any property that so someone.	omeone else owns? Incl	lude any prope	rty you bo	rrowed from, are storing	for, or hold in trust
_	No Yes. Fill in the details.					
	rner's Name dress (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	e the property	Value
Part 10:	Give Details About Environmental Int	formation				
or the p	ourpose of Part 10, the following definit	ions apply:				
toxi	rironmental law means any federal, state c substances, wastes, or material into t ulations controlling the cleanup of thes	the air, land, soil, surfac	e water, groun			

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Brian Dale Groshong
Debtor 2 Rachelle Valene Groshong

Case number (if known)

24.	Has any governmental unit notified you that yo ■ No	ou may be liable or potentially liabl	le un	der or in violation of an environme	ntal law?
	Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	nd	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of an	y release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	nd	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admin —	istrative proceeding under any en	viron	mental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	iture of the case	Status of the case
Par	11: Give Details About Your Business or Co	nnections to Any Business			
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have a	ny o	f the following connections to any	business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	y, eith	ner full-time or part-time	
	☐ A member of a limited liability compan	y (LLC) or limited liability partners	hip (l	LLP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing exec	utive of a corporation			
	☐ An owner of at least 5% of the voting of	or equity securities of a corporation	n		
	■ No. None of the above applies. Go to Par	t 12.			
	☐ Yes. Check all that apply above and fill in	the details below for each busines	ss.		
	Business Name D	escribe the nature of the business	3	Employer Identification number	umbar ar ITIN
		lame of accountant or bookkeeper		Do not include Social Security r	umber of ITIN.
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	, did you give a financial statemen	t to a	nyone about your business? Inclu	de all financial
	■ No □ Yes. Fill in the details below.				
	Name Address (Number, Street, City, State and ZIP Code)	ate Issued			

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Debtor 1	Brian Dale Grosnong						
Debtor 2	Rachelle Valene Groshong		Case number (if known)				
Part 12:	Sign Below						
are true a		lse statement,	nd any attachments, and I declare under penalty of perjury that the answers concealing property, or obtaining money or property by fraud in connection risonment for up to 20 years, or both.				
/s/ Brian	n Dale Groshong	/s/ Ra	chelle Valene Groshong				
Brian Da	ale Groshong	Rachelle Valene Groshong					
Signature	e of Debtor 1	Signat	ure of Debtor 2				
Date M	lay 14, 2019	Date	May 14, 2019				
Did you at	ttach additional pages to Your Statement	of Financial	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?				
■ No							
☐ Yes							
Did you pa	ay or agree to pay someone who is not a	n attorney to I	nelp you fill out bankruptcy forms?				
■ No							
☐ Yes. Na	ame of Person Attach the Bankrupto	cy Petition Prep	parer's Notice, Declaration, and Signature (Official Form 119).				

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LOCAL FORM 1007-1 REVISED 06/16

United States Bankruptcy Court District of Minnesota

In re	Brian Dale Groshong Rachelle Valene Groshong				Case No.		
	Debtor	r(s)			Chapter	13	
	DISCLOSURE OF COMPENSATION	OF	A	TTORNEY	FOR D	EBT	ГOR
paid t	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(tr(s)) and that compensation paid to me within one year before one, for services rendered or to be rendered on behalf of the uptcy case is as follows:	e the	e i	filing of the p	etition in	bank	cruptcy, or agreed to be
	egal Services, I have agreed to accept	\$	_	3,500.00			_
	to the filing of this statement I have received	\$ \$	_	0.00 3,500.00			-
2. T	The source of the compensation paid to me was: ■ Debtor □ Other (specify))	-				-
3. T	The source of the compensation to be paid to me is: Debtor Debtor Other (specify))					
	I have not agreed to share the above-disclosed compensa ates of my law firm.	tion	ιV	with any othe	r person ı	ınles	s they are members and
associ	☐ I have agreed to share the above-disclosed compensation ates of my law firm. A copy of the agreement, together wimpensation, is attached.			•	•		
	In return for the above-disclosed fee, together with such fed by 11 U.S.C. §528(a)(1), I have agreed to render legal se						
	A. Analysis of the debtor's financial situation, and rendering tition in bankruptcy;	ng a	ıd	vice to the d	ebtor in d	etern	nining whether to file a
I	3. Preparation and filing of any petition, schedules, statemer	nts o	of	affairs and pl	an which	may	be required;
	C. Representation of the debtor at the meeting of creditors hereof;	an	d	confirmation	hearing,	and	any adjourned hearings
I	D. Representation of the debtor in contested bankruptcy mat	ters;	; ε	and			
I	E. Other services reasonably necessary to represent the debto	or(s)).				

6. Pursuant to Local Rules 1007-1 and 1007-3-1, I have advised the debtor of the requirements in the Statement of Financial Affairs to disclose all payments made, or property transferred, by or on behalf of the debtor to any person, including attorneys, for consultation concerning debt consolidation or reorganization, relief under bankruptcy law, or preparation of a petition in bankruptcy. I have reviewed the debtor's disclosures and they are accurate and complete to the

best of my knowledge.

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LOCAL FORM 1007-1 REVISED 06/16

CERTIFICATION

	written contract required by 11 U.S.C. §528(a)(1), is a complete ent to me for representation of the debtor(s) in this bankruptcy case.
	•
Dated: May 14, 2019	Signature of Attorney
	/s/ Jake Peden
	Jake Peden

Fill in this information to identify your case:					
Debtor 1	Brian Dale Groshong				
Debtor 2 (Spouse, if filing)	Rachelle Valene Groshong				
United States E	Sankruptcy Court for the: District of Minnesota				
Case number (if known)					

Che	Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:							
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	 Disposable income is determined under 11 U.S.C. § 1325(b)(3). 						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 2,830.00 4,178.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Rachelle Valene Groshong Debtor 2 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 \$ 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Temporary Disability 0.00 \$ 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total average monthly income. Add lines 2 through 10 for 3.809.00 4,178.00 7,987.00 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 7,987.00 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 7,987.00 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 7.987.00 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). x 12 95,844.00 15b. The result is your current monthly income for the year for this part of the form.

Brian Dale Groshong

Debtor 1

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Rachelle Valene Groshong Debtor 2 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. MN 2 16b. Fill in the number of people in your household. 76.398.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 17a. 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) Part 3: 18. Copy your total average monthly income from line 11. 7,987.00 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 7,987.00 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 7,987.00 20a. Copy line 19b Multiply by 12 (the number of months in a year). x 12 95.844.00 \$ 20b. The result is your current monthly income for the year for this part of the form 76,398.00 \$ 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment* period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4. The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Brian Dale Groshong X /s/ Rachelle Valene Groshong **Brian Dale Groshong** Rachelle Valene Groshong Signature of Debtor 1 Signature of Debtor 2 Date May 14, 2019 Date May 14, 2019 MM / DD / YYYY MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Brian Dale Groshong

Debtor 1

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Fill in	this infor	mation to ide	entify your case	:							
Debto	r 1 _	Brian Dale	Groshong								
Debto			alene Groshon	g							
(Spou	se, if filing))									
United	d States Ba	ankruptcy Cou	rt for the: Distri	ct of Minnesota	1						
Case (if kno	number _							☐ Che	ck if this is	an amende	ed filing
(,										· ·
	l Form 122		ulation of	Vour Di	enoeah	do In	como				0.4/4
GHa	ipiei i	13 Gaict	ulation of	Toul Di	sposau	ne III	Come				04/19
			need your comp Form 122C-1).	leted copy of (Chapter 13 S	Statemer	nt of Your Cu	ırrent Montf	nly Income	and Calculat	ion of
space	is needed	l, attach a sep	as possible. If to parate sheet to to name and case r	his form, Inclu	de the line n						
Part 1	Calc	ulate Your D	eductions from	Your Income							
the	questions	s in lines 6-15	vice (IRS) issues 5. To find the IRS vailable at the b	S standards, go	o online usin						
exp	enses if the	ey are higher	ts set out in lines than the standard any amounts tha	ds. Do not inclu	de any operat	ting expe	enses that yo	u subtracted	from incom		
If yo	our expens	es differ from	month to month,	enter the avera	ige expense.						
Not	e: Line nur	mbers 1-4 are	not used in this f	orm. These nun	mbers apply to	o informa	ation required	l by a similar	form used i	n chapter 7 c	ases.
5.	The num	nber of peopl	e used in detern	nining your de	ductions fro	m incon	ne				
	plus the r	number of any	eople who could by additional deper	ndents whom yo						2	
Nat	tional Stan	ndards	You must use	the IRS Nationa	al Standards	to answ	er the questic	ons in lines 6	-7.		
6.			other items: Usin ollar amount for fo				in line 5 and t	the IRS Natio	onal	\$	1,288.00
7.	the dollar people w	r amount for o ho are 65 or c	care allowance: ut-of-pocket heal olderbecause ol nount, you may d	th care. The nui der people have	mber of peop e a higher IRS	le is spli S allowa	t into two cate nce for health	egoriespeop	ple who are	under 65 and	

Official Form 122C-2

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Brian Dale Groshong Debtor 1 **Rachelle Valene Groshong** Debtor 2 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 110.00 Copy here=> 110.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 114 7e. Number of people who are 65 or older 0 0.00 7f. Subtotal. Multiply line 7d by line 7e. Copy here=> 0.00 7g. Total. Add line 7c and line 7f 110.00 Copy total here=> 110.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 547.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 977.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment -NONE-Repeat this amount Сору 0.00 0.00 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 977.00 977.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim.

Explain why:

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Rachelle Valene Groshong Debtor 2 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 0.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. **Describe Vehicle 1:** Vehicle 1 13a. Ownership or leasing costs using IRS Local Standard..... 0.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment Repeat this Copy amount on Total Average Monthly Payment 0.00 here => line 33b. 13c. Net Vehicle 1 ownership or lease expense Copy net Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. expense here 0.00 0.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment Copy Repeat this here amount on line Total average monthly payment => 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 0.00 not claim more than the IRS Local Standard for Public Transportation.

Brian Dale Groshong

Debtor 1

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Debtor 1 Debtor 2 Rachelle Valene Groshong Case number (if known)

		addition to the expense of following IRS categories		listed above,	, you are allowed your monthly expenses	for		
16.	self-employment taxes, social s your pay for these taxes. Howe and subtract that number from	security taxes, and Medic ver, if you expect to rece the total monthly amount	care taxes. eive a tax re	You may incefund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from ust divide the expected refund by 12 for taxes.	\$	0.00	
	Do not include real estate, sale	•				Φ	0.00	
17.	Involuntary deductions: The contributions, union dues, and		uctions tha	it your job red	quires, such as retirement			
			b, such as	voluntary 40	1(k) contributions or payroll savings.	\$	0.00	
18.	Life Insurance: The total mont filing together, include payment	e insurance. If two married people are	\$	0.00				
19.	Court-ordered payments: The administrative agency, such as	c	0.00					
	Do not include payments on pa	st due obligations for spo	ousal or ch	ild support. \	You will list these obligations in line 35.	\$	0.00	
20.	Education: The total monthly a	, , ,	education t	hat is either r	required:			
	as a condition for your job, o						0.00	
	for your physically or menta	lly challenged dependen	t child if no	public educa	ation is available for similar services.	\$	0.00	
21.	Childcare: The total monthly a Do not include payments for an			-	sitting, daycare, nursery, and preschool.	\$	0.00	
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.							
	Payments for health insurance	or health savings accour	nts should	be listed only	y in line 25.	\$	0.00	
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted. +\$							
	expenses, such as those reported on line of or official Form 1220 1, or any amount you provide by deducted.							
24.	Add all of the expenses allow	ed under the IRS expe	nse allow	ances.		\$	2,922.00	
	Add lines 6 through 23.	·				\$	2,922.00	
		red under the IRS expe These are additional d Note: Do not include a	eductions	allowed by th		\$	2,922.00	
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability in	These are additional d Note: Do not include a	eductions ny expens	allowed by the allowances			2,922.00	
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability in insurance, disability insurance,	These are additional d Note: Do not include a	eductions ny expens	allowed by the allowances	s listed in lines 6-24. ses. The monthly expenses for health		2,922.00	
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents.	These are additional d Note: Do not include a	eductions ny expens avings acc ounts that a	allowed by the allowances count expending reasonables.	s listed in lines 6-24. ses. The monthly expenses for health		2,922.00	
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance	These are additional d Note: Do not include a nsurance, and health sa and health savings acco	eductions ny expens avings accounts that a	allowed by the allowances count expensive reasonable 0.00	s listed in lines 6-24. ses. The monthly expenses for health		2,922.00	
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance Disability insurance	These are additional d Note: Do not include a nsurance, and health sa and health savings acco	eductions ny expens avings accounts that a	allowed by the allowances count expensive reasonable 0.00	s listed in lines 6-24. ses. The monthly expenses for health		0.00	
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance Disability insurance Health savings account	These are additional dinote: Do not include a nsurance, and health sa and health savings account to the same are a nsurance.	eductions ny expens avings accounts that a	allowed by the allowances count expensive reasonable 0.00 0.00 0.00	s listed in lines 6-24. ses. The monthly expenses for health ly necessary for yourself, your spouse, o	r		
Add	Add lines 6 through 23. Iitional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this tota	These are additional dinote: Do not include a nsurance, and health sa and health savings account to the same are a nsurance.	eductions ny expens avings accounts that a	allowed by the allowances count expensive reasonable 0.00 0.00 0.00	s listed in lines 6-24. ses. The monthly expenses for health ly necessary for yourself, your spouse, o	r		
Add 25.	Add lines 6 through 23. Ilitional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this tota No. How much do you a yes Continued contributions to the continue to pay for the reasonal	These are additional dinate: Do not include a surance, and health sa and health savings account amount? I amount? actually spend? The care of household on the care of household on the care of household on the care of the care are cour immediate family who was a surance and the care are surance and the care are a cour immediate family who was a court immediate f	eductions ny expens avings accounts that a \$ \$ \$ \$ r family m and suppo to is unable	allowed by the allowances count expendere reasonable 0.00 0.00 0.00 0.00 embers. The rt of an elderle to pay for si	c actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may	r		
25. 26.	Add lines 6 through 23. Ilitional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this tota No. How much do you a Yes Continued contributions to the continue to pay for the reasonaryour household or member of yinclude contributions to an according to the contributions to the contributions to an according to the contributions to	These are additional di Note: Do not include a nsurance, and health sa and health savings according actually spend? The care of household on the care of a qualified ABLE there. The reasonably not the care of household of a qualified ABLE there.	eductions ny expens avings acc unts that a \$ \$ r family m and suppo to is unable program. 2 ecessary ne	allowed by the allowances count expense reasonable 0.00 0.00 0.00 0.00 0.00 embers. The rt of an elder et to pay for site U.S.C. § 5. monthly experiences	c actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may	r \$	0.00	

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	Brian Dale Groshong Rachelle Valene Groshong	Case number (if	known)				
	Additional home energy costs. Your hom line 8.	ne energy costs are included in your insurance and ope	rating expenses o	n			
	If you believe that you have home energy of 8, then fill in the excess amount of home en	costs that are more than the home energy costs include nergy costs	d in expenses on	line			
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must show that ary.	the additional		\$	0.00	
	Education expenses for dependent child \$170.83* per child) that you pay for your depublic elementary or secondary school.	or					
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain whot already accounted for in lines 6-23.	hy the amount				
	* Subject to adjustment on 4/01/22, and ev	ery 3 years after that for cases begun on or after the da	ite of adjustment.		\$	0.00	
	Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.						
	To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.						
	You must show that the additional amount	claimed is reasonable and necessary.			\$	0.00	
31.	al						
	Do not include any amount more than 15%	of your gross monthly income.		_	\$	0.00	
	Add all of the additional expense deduc Add lines 25 through 31.	tions.		(.	0.00	
Ded	uctions for Debt Payment						
Т	oans, and other secured debt, fill in lines	s 33a through 33e.					
	reditor in the 60 months after you file for ba Mortgages on your home	ent, add all amounts that are contractually due to each inkruptcy. Then divide by 60.	secured		verage m	onthly	
33a.	mereditor in the 60 months after you file for ba	nkruptcy. Then divide by 60.		pa	verage mayment		
33a.	reditor in the 60 months after you file for ba Mortgages on your home Copy line 9b here			pa	_	onthly	
	reditor in the 60 months after you file for ba Mortgages on your home Copy line 9b here Loans on your first two vehicles	nkruptcy. Then divide by 60.	=>	• \$	_	0.00	
33b.	Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	nkruptcy. Then divide by 60.	=)	\$ \$	_	0.00	
33b. 33c.	Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here	nkruptcy. Then divide by 60.	=)	\$ \$	_	0.00	
33b. 33c. 33d.	Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	nkruptcy. Then divide by 60.	=)	pa \$ \$ \$ \$ \$ \$ \$	_	0.00	
33b. 33c. 33d.	Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	nkruptcy. Then divide by 60.	=> Does payment include taxes	pa \$ \$ \$ \$ \$ \$ \$	_	0.00	
33b. 33c. 33d.	Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	nkruptcy. Then divide by 60.	Does payment include taxes or insurance?	pa \$ \$ \$ \$ \$ \$ \$	_	0.00	
33b. 33c. 33d.	Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	nkruptcy. Then divide by 60.	Does payment include taxes or insurance?	\$ \$ \$ \$ \$	_	0.00	
33b. 33c. 33d.	Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	nkruptcy. Then divide by 60.	Does payment include taxes or insurance? No Yes	\$ \$ \$ \$ \$	_	0.00	
33b. 33c. 33d.	Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	nkruptcy. Then divide by 60.	Does payment include taxes or insurance? No Yes	\$ \$ \$ \$ \$ \$	_	0.00	
33b. 33c. 33d.	Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	nkruptcy. Then divide by 60.	Does payment include taxes or insurance? No Yes No Yes	\$ \$ \$ \$ \$ \$	_	0.00	
33b. 33c. 33d.	Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	nkruptcy. Then divide by 60.	Does payment include taxes or insurance? No Yes No Yes No Yes No Yes	\$ \$ \$ \$ \$ \$	_	0.00	

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Brian Dale Groshong Debtor 1 **Rachelle Valene Groshong** Debtor 2 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount $\div 60 = \$$ -NONE-Сору total 0.00 0.00 Total \$ here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ☐ No. Go to line 36. ■ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 148.32 8.898.88 ÷ 60 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total Average monthly administrative expense here=> \$ 148.32 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 2,922.00 expense allowances Copy line 32, All of the additional expense deductions 0.00 Copy line 37, All of the deductions for debt payment +\$ 148.32 3.070.32 3,070.32 Total deductions..... Copy total here=>

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Brian Dale Groshong Rachelle Valene Groshong Cas				e num	nber (if known)			
Det	termine You	r Disposable Income Under 11 U.S.C. § 13	25(b)	(2)				
							\$	7,987.00
 40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that yo employer withheld from wages as contributions for qualified retirement plans, as specified. 								
			Сору	line 38 here =>	> \$	3,070	.32	
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Debtor 1 Debtor 2	Brian Dale Groshong Rachelle Valene Groshong	_	Case number (if known)
Part 4:	Sign Below		
	By signing here, under penalty of perjury you declare that the inforn		·
X	/s/ Brian Dale Groshong Brian Dale Groshong Signature of Debtor 1	Х	/s/ Rachelle Valene Groshong Rachelle Valene Groshong Signature of Debtor 2
Date	May 14, 2019 MM / DD / YYYY	Date	May 14, 2019 MM / DD / YYYY

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-50397 Doc 1 Filed 05/14/19 Entered 05/14/19 15:51:46 Desc Main Document Page 70 of 74

United States Bankruptcy Court District of Minnesota

In re	Brian Dale Groshong Rachelle Valene Groshong		Case No.						
		Debtor(s)	Chapter	13					
VERIFICATION OF CREDITOR MATRIX									
The ab	ove-named Debtors hereby verify that the attac	hed list of creditors is true and	correct to the best	of their knowledge.					

BANK OF AMERICA 4909 SAVARESE CIRCLE FL1-908-01-50 TAMPA FL 33634

CAPITAL ONE / MENARD ATTN: BANKRUPTCY PO BOX 30285 SALT LAKE CITY UT 84130

CAVALRY PORTFOLIO SERVICES ATTN: BANKRUPTCY DEPARTMENT 500 SUMMIT LAKE STE 400 VALHALLA NY 10595

CHASE CARD SERVICES ATTN: BANKRUPTCY PO BOX 15298 WILMINGTON DE 19850

CITI/SEARS CITIBANK/CENTRALIZED BANKRUPTCY PO BOX 790034 ST LOUIS MO 63179

CITIBANK
CENTRALIZED BANKRUPTCY
PO BOX 790034
ST LOUIS MO 63179

CITIZENS NTL BK PO BOX 231 PARK RAPIDS MN 56470

COMMERCE BANK
ATTN: BANKRUPTCY /KC- REC -10
PO BOX 419248
KANSAS CITY MO 64141

DISCOVER FINANCIAL ATTN: BANKRUPTCY DEPARTMENT PO BOX 15316 WILMINGTON DE 19850

FIRST NATIONAL BANK ATTN: BANKRUPTCY 1620 DODGE ST MAILSTOP 4440 OMAHA NE 68197

FIRST PREMIER BANK ATTN: BANKRUPTCY DEPT PO BOX 5524 SIOUX FALLS SD 57117

FREEDOM DEBT RELIEF, LLC 4940 S WENDLER DR TEMPE AZ 85282

GRAY PLANT & MOOTY 1010 WEST ST. GERMAIN STREET SAINT CLOUD MN 56301-3406

HSBC BANK ATTN: BANKRUPTCY PO BOX 2013 BUFFALO NY 14240

INTERNAL REVENUE SERVICE CENTRALIZED INSOLVENCY PO BOX 7346 PHILADELPHIA PA 19101-7346

MESSERLI & KRAMER 3033 CAMPUS DRIVE SUITE 250 PLYMOUTH MN 55441-2662 MID-CENTRAL FED SAVING 520 JEFFERSON ST S WADENA MN 56482

MN DEPT OF REVENUE ATTN: DENISE JONES PO BOX 64447 SAINT PAUL MN 55164

NATIONWIDE CREDIT PO BOX 14581 DES MOINES IA 50306

PLANET HOME LENDING, L 10 RESEARCH PKWY WALLINGFORD CT 06492

RAUSCH, STURM, ISRAEL, ENERSON&H 3209 W 76TH ST, SUITE 301 MINNEAPOLIS MN 55435

ROBERT S. GITMEID & ASSOC. PLL 11 BROADWAY #1677 NEW YORK NY 10004

SCHEELS VISA PO BOX 2557 OMAHA NE 68103

SOCIAL SECURITY ADMINSTRATION OFFICE OF REGIONAL COMMISSIONER 26 FEDERAL PLAZA RM 40-120 NEW YORK NY 10278

THE BUREAUS
650 DUNDEE ROAD
SUITE 370
NORTHBROOK IL 60062

VERIZON WIRELESS BANKRUPTCY DEPT 500 TECHNOLOGY DR., SUITE 500 WELDON SPRING MO 63304

WADENA COUNTY 415 SOUTH JEFFERSON STREET WADENA MN 56482

WILFORD, GESKE & COOK 7616 CURRELL BLVD SUITE 200 WOODBURY MN 55215-4393